GMS Band Handbook Acknowledgement Form

2026-2027

After reading the band handbook, I agree with the philosophies and policies of the band directors and agree to adhere to them to the best of my ability.

I further understand that I will be held accountable for the information in this handbook in cases where conflicts arise with band activities. **Not reading the handbook will not be accepted as an excuse.**

I also give permission for photos of my child to be used on the Band Webpage and other promotional materials for the band. **Please strike through the previous sentence if you do not consent and initial the strikethrough.**

I understand that a successful band is made up of committed students who are willing to work together with the band staff toward common goals. The sole purpose of these rules is to ensure a great experience for all members of the Greenville MS Band without being subjected to those who would prohibit learning from taking place.

_____ _____

Student Signature Print Name

_____ _____

Parent Signature Print Name

Grade Level (Circle One): 7th / 8th

Please return this form to school during the first month of school.

GMS BAND FIELD TRIP 2026-2027

Parental/Guardian Consent Form and Liability waiver

Participant's / Child's Name: _____ Birth date: _____

Parent/Guardian's Name: _____

Home Phone: _____Work Phone: _____

E-Mail: _____

I, (Parent/Guardian) _____, grant permission for my child, (child's Name)_____, to participate in this field trip event that requires transportation. This activity will take place under the guidance and direction of employees and/or volunteers from **Greenville Middle School Band.**

A brief description of the activity follows:

Type of event: **Band Contests/Auditions**

Location of Event: **TBD Based on Event (all located in DFW area)**

Individual(s) in charge: **Band Directors - Kelsey Mattice, Trent McGee, and John Grant**

Date and time of departure: **TBD Based on Event**

Mode of transportation to and from event: **School District Bus or Vehicle**

Medical Matters:

**Please contact the director or school principal for consideration of appropriate accommodations.*

I hereby warrant that to the best of my knowledge, my child is in good health, and grant permission for my child to attend the above named event(s). Below is a list of medical information the school needs to be aware of (ex: allergies, chronic illnesses, medications, etc); if there are none write "none", if they are listed with the school nurse, please write that as well.

_____

_____

Emergency Medical Treatment:

This is to certify that I authorize the Superintendent or a designated representative to secure any and all emergency medical care and treatment for my child for acute illness suffered or injury sustained while participating in this trip or activity. I understand that, while student safety is a high priority for the District, under State Law, the school is not responsible for medical costs associated with student injury

In the event of an emergency and you are unable to reach me at the above numbers, contact:

Name: _____ Relationship: _____

Phone : _____

Release and Waiver of Liability:

In consideration for my child's participation in the above-mentioned field trip or activity, I expressly release and waive liability, now and at any time in the future, Greenville ISD, its Trustees, employees, agents, and assigns, for any and all claims for medical expenses, loss of services, injury to person or property, death, or other claims, actions, or liabilities made against it on them on behalf of my child, regardless of the cause of such claims, actions, or liabilities, or any concurrent or contributing fault or negligence of it or them as such may result from my child's participation in the above mentioned trip.

Indemnification and Hold Harmless:

In further consideration for my child's participation in the above-mentioned field trip or activity, I also agree to indemnify and hold harmless the Greenville ISD, its Trustees, employees, agents, and assigns, from and against any and all suits, actions, losses, damages, claims, or liabilities of any character, type, or description, including attorney's fees and court costs, that may result from my child's participation in the above mentioned trip or activity. I understand that the Greenville ISD, its Trustees, employees, and agents are not waiving any sovereign or governmental immunity, which it or they have under Texas law. I have read and understand this release and I sign it voluntarily and with full knowledge of its significance.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor participant. I agree that I have filled out this form to the best of my knowledge and the information provided is accurate and complete.

Signature: _____ Date: _____